CALIFORNIA

AND

WESTERN MEDICINE

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FIVE-YEAR STUDY PROGRAM FOR GRADUATES IN MEDICINE

PROGRAM II

SPONSORED BY

THE CALIFORNIA MEDICAL ASSOCIATION THROUGH THE COMMITTEE ON POSTGRADUATE WORK



FOREWORD

The American Medical Association, with its constituent state and county units, recognizes the need for the continued education of practitioners of medicine.

Postgraduate work comprises the continuation education of the practitioner of scientific medicine. It enables him to remain abreast of scientific progress and to apply in his daily practice the newer procedures with an understanding of their underlying principles and fundamentals.

The California Medical Association acknowledges and proposes to discharge its obligation to afford opportunities to its members to engage in continuing educational studies with a minimum of inconvenience, time, and expense. To that end, the educational opportunities listed in this prospectus have been developed and are being made available to members of the Association.

These conferences are not intended to prepare physicians for any specialty. The subjects presented will be dealt with in a practical, clinical manner, and not didactically. Clinical demonstrations will feature each presentation.

The conferences have been planned on a five-year program basis, and each year will disclose a varied arrangement of subjects. Policies, methods, attendance credits, reviews, and short intensive intramural courses in the medical colleges of this State will be announced from time to time in California and Western Medicine.

Clinicians will be selected from the staffs of all four California medical colleges and from the staffs of approved hospitals. In every instance the clinician will be one who has established a reputation as being a competent man in the subject assigned, and possesses the ability to conduct his clinic in true teaching atmosphere.

The committee trusts that members will recognize the great personal value that this program can have for every practicing member. It is hoped they will embrace these opportunities in their respective districts. Correspondence is invited.

Communications for the Committee on Postgraduate activities should be sent to the Central Office of the California Medical Association, addressed to the California Medical Association Committee on Postgraduate Activities, care of George H. Kress, Secretary, 450 Sutter Street, San Francisco, California.

October, 1938.

Committee on Postgraduate Activities:

JOHN C. RUDDOCK, M. D., Chairman F. E. CLOUGH, M. D. F. F. GUNDRUM, M. D. GEORGE H. KRESS, Secretary.

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CALIFORNIA MEDICAL ASSOCIATION

Excerpts from the Constitution

ARTICLE I .- NAME

Section 1.-Name

The name of this organization is the California Medical Association.

ARTICLE II .- PURPOSES AND GENERAL ORGANIZATION

Section 1.—Purposes

The purposes of this Association are to promote the science and art of medicine, the protection of public health, and the betterment of the medical profession; to promote similar interests of its component county societies; and to unite with similar organizations in other states and territories of the United States to form the American Medical Association.

Section 2.—Organization

This Association, as a state unit of the American Medical Association, and as the state expression of the component county societies of California, shall have three major divisions: one, the Association as a whole, as when it meets in general session; two, the Scientific Assembly and its subordinate or related bodies; and, three, the House of Delegates and its subordinate or related bodies.

EXCERPT FROM BY-LAWS: CHAPTER V.—COMMITTEES

Section 20.-Committee on Postgraduate Activities

The Committee on Postgraduate Activities, of which the secretary-treasurer shall be an ex-officio member, shall use its best efforts to promote the postgraduate and clinical courses and instruction among the component county units of the Association.

The supervision of such postgraduate and clinical courses and instruction shall be carried on through the central offices of the Association, the Council being empowered to defray travel expenses of guest speakers and other costs incident to such work to such amount as in the judgment of the Council may be deemed proper. In the development of such postgraduate and clinical courses and instruction, it is stipulated that the component county societies, through their constituted representatives, shall coöperate with the Standing Committee on Postgraduate Activities and shall also arrange to bear a proper proportion of the expense thereof of such amount as may be mutually agreed upon.

GENERAL INFORMATION

I. POSTGRADUATE CENTERS

The list below gives location of some suggested centers. Conferences may be held in designated cities as the registrants determine to be most desirable and convenient.

STOCKTON

San Joaquin, Stanislaus, Calaveras, Tuolumne. Fresno

Fresno, Merced, Tulare, Kings.

RIVERSIDE, SAN BERNARDINO

San Bernardino, Riverside, Orange.

SAN DIEGO

San Diego, Imperial.

SANTA BARBARA

Santa Barbara, San Luis Obispo, Ventura, Kern.

Santa Clara, Santa Cruz, Monterey, San Benito. Santa Rosa

Sonoma, Napa, Marin, Lake, Mendocino.

SACRAMENTO

Sacramento, Yolo-Colusa-Glenn, Yuba-Sutter, Placer.

NORTHERN CALIFORNIA

Because of extensive distances requiring extraordinary time in traveling on the part of clinicians, the committee contemplates forming teams of clinicians that will conduct a series of conferences in key centers in Northern California.

II. APPLICATION FOR SESSIONS

In applying for and conducting Postgraduate Conferences, the following rules and regulations must be complied with.

1. Each County Society will appoint a Postgraduate Committee. This Committee should be carefully selected and the Chairman should be appointed for a period of five years. Members of this Committee should be men who are interested in Postgraduate education and are willing to take an active part.

2. This Committee will meet and determine:

(a) Place for holding Conference.

(b) Number of Conferences to be held.

(c) Date and opening hour of each Conference.(d) List of subjects desired for each Conference.

3. An application will be filled out with this information and sent to the Secretary of the California Medical Association not later than six weeks before proposed date of Conference. (This is necessary, so that conflicts of various Conferences shall not occur.)

4. Upon receipt of the application the Secretary will assign dates for conferences in conformance, as near as possible, with the wishes of the local com-

mittees. He will then submit to the local conference chairman a list of clinicians available for the courses selected. The Local Committee will immediately determine upon the name of the clinician and an alternate, and so notify the State Secretary.

The State Secretary will then invite the clinician and obtain from him the nature of the clinical material desired. Upon receipt of acceptance from the clinician, the Secretary will forward his name and other pertinent information to the Chairman of the Local Postgraduate Committee. The Local Chairman will then be responsible for all detail arrangements, and also responsible for making the clinical material available to the speaker, and will assume charge of the conference.

5. Program

(a) Ample predetermined time shall be allotted to the clinician for presentation of his subject.

(b) The program must be carried out as announced. There should be no change in time assigned to each clinician.

(c) There is to be no discussion. Questions may be asked. In small groups, round table discussions may be desirable.

(d) No "wet" clinics are permitted.

(e) Due announcement with a copy of the program of each conference shall be given to members of each district.

(f) In making up programs, the various aspects of single subjects or allied subjects are desired. Experience has proved that no more than three subjects tend to successful conferences. If more subjects are desired, additional meetings or conferences should be arranged.

III. POSTGRADUATE CONFERENCES: RECOMMENDA-TIONS TO CLINICIANS

These courses have been prepared and selected by the Committee on Postgraduate Activities, and clinicians must follow the outlined courses which have as their purpose the presentation of fundamental and underlying principles in each subject and their *practical* modern application.

1. It should be remembered that your audience is composed of *graduate* practicing physicians. Undergraduate phases of any subject should be eliminated, unless recent developments have established new, accepted principles and concepts.

2. The presentation shall be clinical and not didactic. Formal papers shall not be read.

3. Presentation of subjects shall be made by illustrations, lantern slides, specimens, and clinical cases whenever possible.

4. Clinic patients will be made available. Clinicians are urged to contact in advance the local committee and inform its members as to the type and number of patients desired, what history and laboratory findings are desired, and what other material will be required. Arrangements should be made to see patients before the time scheduled for presentation.

5. Practical application of diagnosis and treatment should be demonstrated on the patient or described by means of slides, drawings, apparatus, or outlines of therapy, diet, and care.

6. Whenever possible, conferences will be conducted in local hospitals, where clinical facilities will be made available.

7. Discussion of presentations will consist of questions and answers.

8. Avoid intricate theorization. If indicated, give reference to the literature for personal study of theory. Emphasis to underlying fundamentals and practical application should characterize each presentation.

9. Clinicians will be reimbursed for their travel and hotel expenses. Upon approval, they will be reimbursed upon submission of their expense account to the Secretary of the California Medical Association.

IV. CLINICAL INSTRUCTORS

The faculties of the University of California, Stanford, University of Southern California, and the College of Medical Evangelists will coöperate with the California Medical Association by making available members of the faculties for participation in and carrying on these conferences.

The Committee on Postgraduate Conferences will recommend upon request, at any time, members of the California Medical Association specially trained in the various subjects to be given at these conferences.

The California Tuberculosis Association, the California Heart Association and the Pneumonia Control Committee of the California Medical Association, upon request, will recommend members of their organizations for talks and presentations of subjects in tuberculosis and heart disease.

LIST OF COURSES

The courses as listed below have been grouped 7. Contagious Diseases under separate headings. It is not the purpose to survey the complete field of medicine. The Committee feels that the courses as listed below will offer to the medical profession those things that are most valuable at this time.

I. GENERAL MEDICINE

1. Nephritis

This course will deal with the etiological factors, classification, differential diagnosis, evaluation of laboratory procedures, and treatment. Prognosis and complications. Presented through case histories, demonstrations of patients, charts, and lantern slides.

The fevers that continue often create problems of diagnosis that are serious from both the standpoint of the clinician and the patient. This course will consist of classification and types of fevers with methods of differential diagnosis. The discussion to be followed by a Round Table discussion of local case histories.

3. Focal Infection

The relationship of focal infection to general disease.

- (a) Teeth
- (b) Sinuses
- (c) Tonsils
- (d) Prostate
- (e) Chronic pelvic inflammatory.
- (f) Pyelocystitis.
- (g) Gall bladder.
- (h) Bronchiectasis.
- (i) Appendicitis.
- (j) Cryptitis.

4. Blood Dyscrasias

General classification with etiological factors. Demonstration of patients. Demonstration of blood smears by means of lantern slides and microscopy.

- (a) Anemias.(b) Leukemias.
- (c) Agranulocytosis.

5. Dysentery

Newer conception of causes of food poisoning, with discussion of keeping foods, home canning, mushroom poisoning, mussel and shellfish poisoning, botulism, amebic dysentery, bacillary dysentery, fat metabolism. Demonstration by patients, case histories, slides and charts.

6. Alcoholism

Discussion of etiological factors, application of etiological factors to individual case in determin-ing choice of treatment. Treatment of alcoholics. Complications and how treated. How to determine an alcoholic.

A general discussion on quarantine and methods of control with differential diagnosis and treatment

- 1. Diphtheria.
- 2. Spinal meningitis.
- 3. Poliomyelitis.
- 4. Rabies.
- 5. Smallpox.
- 6. Scarlet fever.
- Septic sore throat.
- 8. Whooping cough.
- 9. Measles, mumps, and chickenpox.
- 10. Typhoid.

8. Animal-borne Diseases

A general discussion on etiological factors, methods of control, differential diagnosis and treat-

- 1. Undulant fever and tularemia.
- 2. Rocky Mountain spotted fever and relapsing fever
 - 3. Typhus fever.
 - 4. Bubonic plague.
 - 5. Malaria.

9. Supplementary Subject

Special courses will be arranged whenever possible upon written request of local arrangement committees.

II. THE MANAGEMENT OF THE PNEUMONIAS

Each and every conference during the season 1938-1939 shall devote a portion of its time to the subject of pneumonia by selecting any one of the following topics as listed below. A selection of Course 10 of six courses will include all of the six subtopics.

The average total yearly deaths from pneumonia in the State of California reaches over 4,000.

It is believed that, with the proper methods of diagnosis and treatment now available, this mortality can be materially reduced.

10. Pneumonia

The courses in pneumonia will cover the following aspects of the management of the pneumonias:

- (a) Clinical aspects and diagnosis.
- (b) Specific typing with demonstrations and moving-picture films showing technique.
- (c) General management with special consideration of pathological physiology. Indications for and technique of oxygen therapy, salt and other therapeutic adjuncts.
- (d) Specific serum therapy, with demonstrations and moving-picture films showing technique.
- (e) Pneumonia complications in surgery, obstetrics, and other conditions.
- (f) Prognosis as to types, time of giving serum and blood cultures.

III HEART DISEASE

The courses on heart disease are arranged and given with the coöperation of the California Heart Association, which has made available to the Committee on Postgraduate Activities moving picture films, lantern slides, and statistics, as well as participation in their established program of consultative clinics on cardiac diagnosis.

11. A Heart Clinic

A talking motion picture in color. Heart sounds synchronized with animated valves of the pathological specimens of the cases cited. Offered by the California Heart Association.

12. Electrocardiography Simplified

A motion picture showing animated drawings of the course of the impulse through the bundle of His coördinated with the electrocardiogram and its interpretation. Offered by the California Heart Association.

13. Cardiac Silhouettes

Demonstration of x-ray films of various types of cardiovascular disease with interpretation of films

14. Rheumatic Heart Disease

A demonstration by pathological material illustrating typical heart lesions, with presention of

15. Syphilitic Heart Disease

A demonstration of specimens showing lesions of the circulatory system due to syphilis. Case presentation, treatment, and prognosis.

16. Subacute Bacterial Endocarditis

Demonstration of specimens. Case presentation, etiology, course, treatment, and prognosis.

17. Hypertension

Clinical discussion with presentation of cases.

18. Arteriosclerosis

Case presentation.

19. Coronary Artery Disease

Case presentations of illustrative cases of "angina pectoris," and coronary thrombosis. Demonstration and electrocardiograms of pathological specimens.

20. The Cardiac Irregularities

Case demonstration of the more common types of cardiac irregularities, with short discussion of etiology, prognosis, and treatment.

21. Embolism Complicating Heart Disease

Etiology, diagnosis, and treatment. Indications for, and technique of, embolectomy will be discussed.

22. Peripheral Vascular Disease

This course will deal with both venous and arterial disease of the extremeties:

- (a) Gangrene.(b) Buerger's disease.
- (c) Raymond's disease.
- (d) Erythromelalgia.
- (e) Arteriovenous aneurysm.
- (f) Embolism.
- (g) Phlebitis.
- (h) Varices.

23. Congestive Heart Failure

Demonstration of cases showing various stages of congestive failure.

Discussion of treatment by rest, digitalis, and diet. Convalescent care.

24. Vitamins and the Heart

25. Congenital Heart Disease

A short discussion with lantern slide demonstration of cases. Prognosis of various lesions. (Presentation of cases when available.)

IV. DISEASES OF THE CHEST

Diseases of the chest will be presented in eight periods by demonstration and graphic methods.

26. Epidemiology, Etiology, and Public Health Aspects

One of the outstanding accomplishments of the present century in medicine is the yielding of tuberculosis to the measures which are being directed toward its prevention and care, and the differential diagnosis of other chest diseases. The first period will demonstrate the epidemiology, the etiology, and the public health and sociological factors of pulmonary diseases. (Lecture.)

Note: The courses on diseases of the chest are offered with the assistance of the California Tuberculosis Association. This Association has for a number of years held postgraduate clinics in conjunction with county medical societies on the diagnosis and treatment of tuberculosis. These clinics are now offered and are made available to the Committee on Postgraduate Activities.

27. Classification of Pulmonary Tuberculosis

The response of the body to an invasion of the tubercle bacillus for the first time is the formation of a lesion at the site of infection and in the regional lymph nodes. A first infection lesion within a month or two is followed by altered tissue reactions. Pathology will be demonstrated; childhood type and exudative, productive and chronic ulcerative adult types of the disease will be depicted by x-ray films.

28. Diagnosis of Pulmonary Tuberculosis

Careful study and accurate systematic physical examination of patients will be demonstrated. Illustrated and demonstrated will be history, symptoms and clinical manifestations, physical signs, x-ray evidence, tuberculin test, laboratory tests, exclusion of other causes.

See Course No. 27.

29. Medical Treatment of Pulmonary Tuberculosis

Pathologic evidence of healing of lesions will be presented, criteria of selective treatment will be demonstrated, and procedure illustrated, such as rest, diet, fresh air, sunshine, drug therapy, mechanical devices, and individual study of the patient.

See Course No. 27.

30. Nontuberculous Diseases of the Lungs

So common a disease as pulmonary tuberculosis is apt to be confused with other diseases of the chest. Differential diagnosis will be demonstrated and classified as follows: Asthma and allergic disorders; bronchopneumonia: bronchiectasis, lung abscess, pleurisies, lung and mediastinal tumors, Hodgkin's disease, pulmonary infarcts, bronchitis, aortic aneurysm, pulmonary syphilis, fungus infections, bronchial stenosis, foreign bodies, and emphysema.

31. Surgical Treatment of Pulmonary Disease

Selective methods of surgical treatment will be demonstrated and the following procedures illustrated or demonstrated: phrenicotomy, artificial pneumothorax, pneumoperitoneum, thoracoplasty, extrapleural and intrapleural pneumolysis, drainage of the lung and pleura, and lobectomy.

V. LESIONS OF THE ABDOMEN

Courses offered in this subject to cover methods of diagnosis, special tests, methods of treatment, both medical and surgical. The courses will be presented through case histories, bedside clinics, demonstration of patients, lantern slides, and presentation of pathological material.

32. Intestinal Obstruction

This course will deal with the etiological factors of intestinal obstruction. Brief case history reports of cases, demonstrating the various etiological factors. Surgery of acute and chronic cases with the preoperative and postoperative case. Complications and how avoidable.

33. Perforations

This course will deal with the various types and causes of perforations occurring in the gastro-intestinal tract. The diagnosis and treatment of acute perforations of esophagus, stomach, duodenum, small intestines, and colon. When to operate. Mortality statistics. Complications. Presented by case histories and lantern-slide demonstrations.

34. Appendicitis

Differential diagnosis with mistakes encountered. What is chronic appendicitis? How diagnosed? Value of laboratory work. Sedimentation rate and Schilling counts. Roentgen diagnosis. Surgery with indications pro and con. Presented by demonstration of patients with case histories.

35. Acute Cholecystitis

Differential diagnosis with evaluation of laboratory methods and procedures. The gangrenous gall bladder. Empyema of gall bladder. Rupture—cholelithiasis with acute attacks—acute inflammation. Medical management and surgical indications and procedures.

This course to be presented by case demonstra-

tion.

36. Acute Pancreatitis

Methods of differential diagnosis, with indications for surgical interference and operative procedures. Causes. Complications.

Presented by case histories.

37. Visceral Rupture

Relation of visceral rupture to industrial injury. Traumatic rupture of bowel, liver, spleen, kidney, and bladder. Methods of diagnosis. Relation to skull injuries. Procedures to institute.

Presented by case histories.

38. Peritonitis

Various types of inflammatory lesions of peritoneal cavity. Colon, streptococcus, staphylococcus, and tuberculosis. Methods of culture and vaccine treatment. Ileus. Spider bite. Surgical judgment.

Presented by case demonstration and histories.

39. Tumors of the Abdominal Cavity

Diagnosis, with relation to size, mobility, consistency, pain, fever, etc. Presentation of cases with discussion of differential diagnosis and treatment.

40. Colitis

Presentations of cases with discussion, demonstrating:

(a) The spastic colon.

(b) Ulcerative colitis.(c) Amebic dysentery.

(d) Enterocolitis, acute and chronic.

The management of the cases, with treatment and diet, will be brought out in the discussion of the cases.

41. Ascites

A demonstration of cases with ascites and lantern-slide demonstration of types. Laboratory methods of differentiation of causes of ascites. Methods of tapping. Drug therapy. Surgery.

42. Cirrhosis of Liver

Case demonstration, with presentation of pathological material showing different types. Atrophic, hypertrophic, biliary, acute atrophy, and hepar lobatum. Treatment.

43. Peptic Ulcers

This course to consider gastric and duodenal ulcers. Demonstration of cases, case histories with differential diagnosis as shown by roentgen plates, gastric analysis, etc. Medical regimen and surgical treatment.

44. Malignancy

Consideration of malignant lesions of the stomach. Statistics by lantern-slide presentation. Demonstration of cases and case histories, Treatment: palliative and surgical; exploratory surgery.

45. Malignancy of Colon

Newer methods of surgical treatment of malignancies of cecum, colon, sigmoid, and rectum. Radiation therapy.

46. Hemorrhage

Demonstration by cases and case history of various types of abdominal hemorrhage.

- (a) Esophageal hemorrhage.
- (b) Gastric hemorrhage.
- (c) Duodenal and small bowel bleeding.
- (d) Large bowel bleeding.
- (e) Rectal bleeding.
- (f) Intraperitoneal hemorrhage.

Symptomatology, differential diagnosis, treatment.

VI. SURGERY

It is not the purpose of these courses to perfect individuals in the technique of specialized surgical procedures, as these can be acquired only by intensive training at certain medical centers. Explanations and discussions with regard to what can be accomplished, differential diagnosis, methods of choice and judgment are primary considerations.

47. Infections

A discussion of principles, treatment and complications of infection.

- (a) Carbuncles and boils.
- (b) Infected sebaceous cysts.
- (c) Lymphangitis.
- (d) Cold abscess.
- (e) Thrombophlebitis.
- (f) Face and head infections.
- (g) Ludwig's angina.

48. Hand Injuries and Infections

- (a) Industrial traumatic injuries.
 - 1. Cuts and bruises.
 - 2. Fractures.
 - 3. Meat and fish infections.
 - 4. Thorns.
 - 5. Felons and paronychia.
 - 6. Phlegmons.
- (b) Deformities.
- (c) Amputations.
- (d) Sprains.
- (e) Tendon and nerve injuries.

49. Goiter

Presentation of patients, demonstrating the different types, with clinical manifestations.

A discussion of etiological factors involved in the various types.

Treatment both medical and surgical.

50. Tumors of the Breast

Classification, types, differential diagnosis. Methods of treatment.

51. Supplementary Subject

Special courses will be arranged on surgical subjects to meet the requests of various groups. It is understood that technical descriptions of specialized procedures are not subjects of general interest.

VII. OCCUPATIONAL AND INDUSTRIAL DISEASES

52. Relationship of Disease to Employment

This course will be a discussion of the problem of determining the relation of disease to occupation, with legal aspect and employer's liability. Citation of cases. Round Table discussion of local problems and cases.

53. Silicosis

Effect of inhalation of foreign materials such as carbon, cement dust, marble, quartz, asbestos, sand, and various kinds of dust. What disability results? General discussion of subject.

54. Fumes

Effect of inhalation of various kinds of fumes on the body—carbon monoxide, ethylene, lead, cyanide, pyrethrum, illuminating gas. Does permanent disability result? General discussion of subject.

55. Electric Shock, Drowning, and Sunstroke

General Round Table discussion, with demonstration of resuscitation methods.

56. Burns

The treatment of burns and discussion of subject—sunburn, acid and drug burns, explosions, searing burns, scalds. How to prevent disfigurement and contractures?

57. Trauma and Tumors

Discussion of causative relationship of trauma to tumors. Experimental studies.

- (a) Benign.
- (b) Malignant.

Citation of case reports.

VIII. GYNECOLOGY*

58. Menstrual Disorders

Classification.

Anatomical, physiological, and endocrinological factors.

Points in differentiation.

Treatment-dietetic, therapeutic-glandular extracts and substances, and fallacies in physiotherapy and surgical interference by curettage, suspension.

59. Pelvic Infections

Nonspecific. Specific.

60. Cancer-Cervix and Uterine

This session will be devoted to a thorough presentation of the subject, with emphasis upon methods of early diagnosis and treatment, and use of radium with x-ray.

61. Benign Lesions and Uterine Tumors

Endocervicitis and lacerations.

Polypi.

Ovarian cysts.

Trichomonas.

Malpositions—procidentia.

Indications and limitations of office treatment.

IX. OBSTETRICS†

62. Operative Obstetrics

Physical indications-mother, child. (X-ray and measurements of birth canal.)

Version-high and low forceps.

Episiotomy-lacerations-cervical and perineal.

Illustrative cases.

Surgical technique.

Accidents and complicating emergencies.

63. Toxemias of Pregnancy

Prenatal supervision.

Eclampsia-prodromal symptoms and therapeutic treatment.

Eclamptic seizure. Management and indications for termination of pregnancy by induction or section-precautions and technique.

Pneumonia and acute infections during pregnancy. Treatment of the disease and management of complicating abortion or premature

Acute surgical conditions in the abdomen complicating pregnancy.

- (a) Appendicitis.
- (b) Obstruction.
- (c) Acute cholecystitis.(d) Perforations.
- (e) Trauma.

Management—Surgical technique.

* See also Obstetrics IX, Topics 62-65.

† See also Gynecology VIII, Topics 58-61.

64. Management of Obstetrical Emergencies

Placenta praevia-diagnosis; control of bleeding; manual or section delivery.

Placental separation; diagnosis; treatment tech-

Uterine rupture—etiology; surgical treatment.

Precipitate delivery and third-degree laceration. Technique of repair. Demonstration of operative procedures.

65. Postpuerperal Complications

Septicemia.

Sinus thrombosis.

Pelvic varicosities.

Vesical fistula.

Phlebitis.

Mastitis.

Presentation will include etiology, prophylactic measures, diagnosis, and treatment, illustrated by case histories and pathological specimens, and bacteriological findings.

X. DISORDERS OF NUTRITION, METABOLISM AND GLANDS OF INTERNAL SECRETION

66. Dietary Deficiency

Etiology, symptoms, signs and treatment of deficiency disease, such as pellagra, beriberi, peripheral neuritis, scurvy, and multiple deficiency, primary and secondary.

67. Obesity

Etiology and treatment.

68. Undernutrition

Etiology and treatment.

69. Gout

Differential diagnosis and management.

70. Disturbances of Carbohydrate Metabolism other than Diabetes Mellitus, such as:

- (a) Spontaneous hypoglycemia or hyperinsulinism.
- (b) Nondiabetic "glycosurias."
- (c) Glycogen storage (von Gierke's) disease.

Differential diagnosis and treatment.

71. Diabetes Mellitus

- (a) Uncomplicated juvenile and adult types. Management by diet and various types of insulin.
- (b) Complicated. Management during complications such as acute infections, surgery, pregnancy, etc.
- (c) Diabetes and cardiovascular disease. Relationship and management.

72. Endocrine Problems

Differential diagnosis and treatment of disorders of the pituitary, thyroid, parathyroid, adrenal and genital glands.

73. Disturbances of Acid-Base Balance

Etiology, differential diagnosis and treatment.

No set papers nor lectures are to be given on any of the above topics. Each subject is to be developed following the presentation of one or more patients from the local community, who have had adequate study and who exhibit problems falling within one of the above subdivisions.

Charts, graphs, lantern slides, etc., may be used if applicable to the specific problems presented.

XI. ALLERGY

74. Discussion and Illustration of Accepted Principles Governing the Allergic Theory

Commoner allergic conditions and general princiciples governing examination, with illustration of reactions and their etiology.

Symptomatology, diagnosis.

- (a) Diet.
- (b) Tests.

75. Involved Allergic Reactions

Asthma.

Headaches.

Gastro-intestinal.

Nasal-pharyngeal (hay fever?).

Allergy in infants.

These will be discussed in the light of present knowledge, with emphasis upon differential diagnosis, reaction tests, diet, and antigen treatment. Illustrative cases will be presented.

XII. PEDIATRICS

76. The New-Born: Full Term; Premature

Immediate care.

Common disorders during neonatal period.

General management.

Artificial feeding.

Breast feeding.

Motion pictures, showing handling of the infant, preparation of food, etc., will be exhibited.

77. Infant Care

Besides hygiene and diet, growth and development will be carefully detailed. Lantern slides and motion pictures.

78. The Preschool Age Child

Hygiene (physical, mental).

Diet.

Common defects and their correction.

The fat child.

The thin child.

79. Infantile Eczema

Various types will be discussed and classified, with suggested treatment. Lantern slides.

80. Rickets and Scurvy

Historical review.

Changing concepts.

Criteria for diagnosis.

Course if untreated.

Prevention and treatment.

X-ray plates, lantern slides, motion pictures.

81. Pyelitis in Infancy and Childhood

Case histories will be presented.

Laboratory work necessary for diagnosis will

be demonstrated. Recent advances in therapy.

Surgical aspects.

82. Abdominal Pain in Children

A résumé of the subject is offered.

Differential diagnosis is stressed.

Medical conditions.

Surgical conditions.

(Patients will be shown, if available.)

83. Otitis Media

Seasonal variation.

Diagnosis (infants, older children).

Indications for paracentesis.

Complications.

Treatment (palliative, surgical). Lantern slides. Proper use of the otoscope will be demonstrated.

84. The Juvenile Diabetic

The problem of management.

Diabetic coma.

Insulin shock.

Protamin insulin.

Case histories and lantern slides.

85. Active and Passive Immunization

Smallpox.

Diphtheria.

Measles.

Whooping cough.

Scarlet fever.

Poliomyelitis.

Tetanus.

Common colds.

Poison Oak and Ivy.

Miscellaneous.

86. Skin Tests in Common Use

The various skin tests for tuberculosis.

The Schick test.

The Dick test.

Complement-fixation tests.

Allergy test.

Value of the various tests will be discussed, technique demonstrated, and reactions explained.

87. Sera, Vaccines, Vitamins

A summary of important experiences with commonly used sera and vaccines is offered. Contraindications and dangers are discussed and beneficial effects evaluated. Our present knowledge of vitamins is summarized, its uses and abuses pointed out.

88. Endocrinology in Children

What do we know for sure?

Hypothyroid and hyperthyroid and pituitary disturbances, are carefully presented with lantern slides.

Other endocrine disorders discussed.

The value of endocrine products carefully estimated.

XIII. OPHTHALMOLOGY

89. Courses will include any of the following as requested:

- (a) Medical ophthalmology, fundus examination, tumors, etc.
- (b) Ocular therapeutics, foreign bodies, first aid and extent to which general practitioner should limit his care.
- (c) Muscles, squint, crossed eyes, with films.
- (d) Conjunctivitis and external diseases and lacrymal apparatus.
- (e) Defective vision, contact glasses, refraction.
- (f) Cataract and glaucoma.

XIV. OTOLARYNGOLOGY

90. Courses will include any of the following as requested

- (a) Focal infection.
- (b) Ear, nose and throat problems in relation to contagious diseases.
- (c) Foreign bodies in the respiratory and upper digestive tracts.
- (d) Ear symptoms in relation to head injuries.
- (e) A practical application of histopathology to diseases of ear, nose and throat.
- (f) Acute otitis media, mastoiditis.
- (g) Surgical repair in facial paralysis.

XV. ORTHOPEDICS

91. Back Pain

This course includes a general discussion of causes and types of back pain. Demonstration of patients. Relationship to industrial injury and liability following automobile accidents. Many factors will be brought out in the discussion such as:

- (a) Posture.
- (b) Arthritis.
- (c) Nerve diseases.
- (d) Congenital deformities.
- (e) Back strain.
- (f) Infection.

92. Fractures

The treatment and handling of fractures is a large subject and should be divided into various

headings, any one of which is sufficient to be the topic for a conference.

- (a) Fractures of vertebrae with and without cord lesion.
- (b) Fractures of upper extremity.
 - 1. Clavicle.
 - 2. Scapula.
 - 3. Humerus.
 - 4. Radius and ulna.
 - 5. Hand.
 - 6. Ribs.
- (c) Fractures of lower extremity.
 - 1. Pelvis.
 - 2. Hip.
 - 3. Femur.
 - 4. Patella.
 - 5. Tibia and fibula.
 - 6. Foot.
- (d) Fractures of head.
 - 1. Skull.
 - 2. Face.
 - 3. Jaws.

93. Osteomyelitis

A discussion of etiological factors involved and types of infection of bones. Differential diagnosis. Methods of treatment. Demonstration by means of x-ray films and patients, when available.

94. Congenital Deformities

Various congenital bony deformities demonstrated by photos, lantern slides, x-rays and patients, when available. How treated?

95. Poliomyelitis

Treatment of disease in acute stage. Convalescent stage and corrective measures, including muscle training methods, etc., in overcoming the deformities of the disease.

96. Corrective Physiotherapy and Appliances

Demonstration of various types of massage with physical agents, such as heat, light, etc.

Demonstration of various appliances for corrections of deformities, such as:

- (a) Flat feet.
- (b) Curvatures of the spine.
- (c) Nonunion of fractures.
- (d) Artificial limbs.

Demonstration and discussion of corrective school measures, to correct:

- (a) Round shoulders.
- (b) Flat chest.
- (c) Poor muscular development.

97. Arthritis

Classification of types with demonstration of patients and x-ray plates. Different methods of treating. This will include all types, acute and chronic.

98. Bone Diseases

A demonstration, with lantern slides and x-ray plates, of bone diseases and tumors.

XVI. DERMATOLOGY

99. Eczema and Contact Dermatitis

Differentiation between contact and atopic types of dermatitis. The situation of eczema in the allergic individual. Methods of testing for contact and atopic eczema. Eczematoid reactions to infectious agents, such as infectious eczematoid dermatitis, bacterids and dermatophytids.

100. Pyogenic Infections of the Skin

Diagnosis and treatment of impetigo, ichthyma, furunculosis, carbuncle, erysipelas, sycosis vulgaris. Demonstration of patients.

101. Fungus Infections of the Skin

Diagnosis and treatment of tinea corporis, tinea capitas, dermatophytosis, superficial yeast infections. Demonstration of patients.

102. Parasitic Infections

Diagnosis and treatment of scabies. Pediculosis and insect bites. Demonstration of patients.

103. Seborrheic Affections of the Skin

General discussion of the so-called seborrheic type and the discussion of seborrheic dermatitis. Differentiation from other localized affections, such as lupus erythematosus and psoriasis, and to more extensive types resembling eczema.

Acne vulgaris; its placement as a seborrheic affection. Factors in its production and treatment.

104. Infectious Granulomas

- (a) Tuberculosis of the skin. Discussion of types. Scrofuloderma. Tuberculosis verrucosis cutis. Lupus vulgaris and tuberculides.
- (b) Blastomycosis. Lantern slide demonstrations.
- (c) Sporotrichosis. Lantern slide demonstrations.
- (d) Coccidioides, and leprosy. Lantern slide demonstrations.

105. Infectious Granulomas, continued

(e) Syphilis. Discussion of the type of cutaneous lesions in early and late syphilis, and general discussion of the pathogenesis of the disease. Treatment of syphilis with especial emphasis on the treatment of early syphilis. Complications of treatment.

106. Multiform Erythema and Toxic Eruptions

Description of types of lesions of the skin in this class of eruptions in general, and the specific discussion of urticaria, erythema multiforms, and drug eruptions.

107. A Group of the Important Dermatoses, Whose Cause is not Definitely Established

Description of lesions with differential diagnosis and treatment. Lantern slides and patients when available.

- (a) Lupus Erythematosus.
- (b) Psoriasis.

- (c) Lichen Planus.
- (d) Pityriasis Rosea.
- (e) Herpes Zoster and Simplex.

108. New Growths

- (a) Benign growths. Types of Nevi. Angiomas. Pigmented moles. Pyogenic Granuloma.
- (b) Warts in common locations and treatment.

109. Malignant Growths

Epitheliomas. Basal celled and squamous celled. Discussion of senile changes in the skin. Preepitheliomatous lesions. Malignant pigmented growths.

110. Skin Manifestations of Systemic Disease

Lantern Slides.

- (a) Lymphoblastoma.
 - 1. Hodgkin's disease.
 - 2. Leukemia.
- (b) Avitaminoses.
 - 1. Scurvy.
 - 2. Pellagra.
- (c) Diseases of Endocrine System.
 - 1. Thyroid.
 - 2. Parathyroid.
 - 3. Suprarenal.
- (d) Pernicious Anemia.

111. Pruritus

Essential, Etiology; nervous, toxic, systemic disease, senile.

Symptomatic skin disease characterized by eczema, lichen planus, dermatitis herpetiformis, neurodermatitis.

XVII. GENITO-URINARY AND VENEREAL INFECTIONS

112. General Discussion of Pathology of Urinary Tract.

The significance of hematuria, pain, temperature, and the need for complete examination in all cases of urologic disease will be considered.

113. Pathology of the Kidney and Ureter.

Special attention will be given to calculi, tumors, and infections.

114. Pathology of the Bladder.

Bladder-neck obstructions, calculi, tumors, and diverticula will be discussed.

115. A Discussion of the Infections Encountered in Urologic Practice.

This includes parenchymal infections, pyelitis, cystitis, and specific conditions. An evaluation of the newer urinary tract antiseptics will be given.

XVIII. PROCTOLOGY

116. Practical Points in Conducting Examina-

Positions, examining instruments, preparation of patients, what to look for. Types of lesions and characterization. Biopsies and laboratory aids.

The reasons for complete examinations. The necessity for making examinations in several positions. Technique will be described, illustrated, and demonstrated.

117. Treatment

Fissures, hemorrhoids, prolapse, proctitis, pruri-

tus, rectal cysts, infections.

Accepted treatment will be described and demonstrated. Forms of medication will be presented, and valueless measures and remedies will be discussed. Office and hospital, surgical and nonsurgical treatment, and the type of anesthesia will be outlined and merits evaluated.

118. Cancer and Benign Lesions

Precancerous lesions, polypi and proctitis will be considered. Histopathology and diagnostic characteristics will be demonstrated. Treatment and care will be fully discussed and outlined.

119. Congenital Abnormalities

These will be illustrated and corrective measures outlined.

120. Syphilitic and Other Rectal and Perirectal Infections

Syphilitic lesions will be presented. Abscess, fistula, and cryptitis, and their treatment, will be thoroughly reviewed and practical methods demonstrated.

XIX. DISEASES OF CENTRAL NERVOUS SYSTEM

121. Characterized by Somatic Symptoms.

This course will be presented through patients showing various lesions of the Central Nervous System.

(a) Noninflammatory.

1. Vascular.

Patients will be demonstrated when available, to show thrombosis, hemorrhage, aneurism, and sclerosis, with the characteristic nerve lesions.

2. Neoplasms.

Various types of growths involving both brain and cord. Patients will be shown when available. Diagnostic localization of tumors will be demonstrated.

3. Other noninflammatory diseases.

Whenever possible patients will be shown and there will be discussion of various lesions, such as: Multiple sclerosis.

Atrophies.
Palsies.
Epilepsies.

(b) Inflammatory Diseases.

1. The Meningitides.

Discussion of etiology with especial reference to local infections and injuries about the head. Types given with aid of charts, case reports, lantern slides.

2. Parenchymatous Inflammation.

Discussion of types and kinds. Case reports, including discussion of encephalitis, myelitis, gumma, abscess and various granulomatas, will be taken up.

122. Characterized by Mental or Emotional Derangement

(a) Psychoses.

Discussion of definition, with demonstration of differential diagnosis between various types of mental derangement.

(b) Psychoneuroses.

The effect of disorders of the involuntary nervous system on the functions of various internal organs. Methods of diagnosis and treatment. How do psychoneuroses develop? Compensation Neurosis.

XX. LABORATORY EQUIPMENT AND TECHNIQUE

123. Essential Equipment for an Office Laboratory

Specifications and necessary equipment will be outlined and demonstrated. Practical use will be shown. Technician aid described.

124. Laboratory Examinations

Blood, metabolism, cultures. Technique, interpretation and pitfalls will be pointed out and demonstrated.

125. Micropathology

Obtaining specimens.

Fixing of specimens (rapid).

Stains.

Microscopes.

Confirmation.

Records and files.

This session will be devoted to practical discussions and technique of pathological diagnostic methods that can be conducted in a practitioner's

office.

XXI. SUPPLEMENTARY COURSE

126. Legal Medicine

This course will be an invitation discussion by members of the Bar Association of the State of California, taking up phases of the following subjects:

- 1. The doctor on the witness stand.
- 2. Privileged communications.
- 3. Leases and estates.
- 4. Malpractice.
- 5. Fees and collections.

